Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	Thomas First name J Middle name Grillo Last name and Suffix (Sr., Jr., II, III)		First name Middle name
	identification to your meeting with the trustee.			Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8860		

Del	otor 1 Thomas J Grillo		Case number (if known)				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	EINs				
5.	Where you live	12 Knoll Rd	If Debtor 2 lives at a different address:				
		Rocky Point, NY 11778 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Suffolk	Number, Street, City, State & ZIF Code				
		County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing	Check one:	Check one:				
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)				

Deb	otor 1 Thomas J Grillo					Case	number (if known)		
Par	t 2: Tell the Court About Y	our Bank	ruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chapter 7							
		☐ Chapter 11							
		☐ Chapter 12							
		☐ Chapt	ter 13						
8.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.							
						this option, sig	n and attach the Applica	ation for Individuals to Pay	
		☐ I re but app	equest that is not requalities to you	uired to, waive your ur family size and yo	d (You may request fee, and may do so ou are unable to pay	only if your inco	ome is less than 150% o	oter 7. By law, a judge may, of the official poverty line that this option, you must fill out	
		uie	: Аррисаис	on to Have the Chap	nei 7 Filling Fee wa	ived (Official Fo	ini 103b) and me it with	your pennon.	
9.	Have you filed for bankruptcy within the	□ No.							
	last 8 years?	Yes.							
			District	eastern	When	2/14/11	Case number	11-70800	
			District		When		Case number		
			District		When		Case number		
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor				Relationship to y	ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y		
			District		When		Case number, if	known	
11.	Do you rent your	■ No.	Go to li	ine 12.					
	residence?	☐ Yes.	Has yo	ur landlord obtained	d an eviction judgme	ent against you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial</i> this bankruptcy per		Eviction Judgm	nent Against You (Form	101A) and file it as part of	

Deb	tor 1	Thomas J Grillo				Case number (if known)		
Part	t 3:	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor		
12.	Are y	ou a sole proprietor						
		y full- or part-time ness?	■ No.	Go to	Part 4.			
			☐ Yes.	Name	Name and location of business			
business you op an individual, ar separate legal e as a corporation		e proprietorship is a ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC.			of business, if any			
	sole p	have more than one proprietorship, use a rate sheet and attach		Numb	er, Street, City, State & ZIP Code			
		nis petition.		Checi	k the appropriate bo	x to describe your business:		
					Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))		
					Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
					Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
					Commodity Broke	r (as defined in 11 U.S.C. § 101(6))		
					None of the above			
13.	B. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business If you are filing under Chapter 11, the court must know whether you are a small business debtor so deadlines. If you indicate that you are a small business debtor, you must attach your most recent be operations, cash-flow statement, and federal income tax return or if any of these documents do not in 11 U.S.C. 1116(1)(B).				a small business debtor, you must attach your most recent balance sheet, statement of			
	debte For a	definition of small	■ No.	I am r	ot filing under Chap	oter 11.		
		ess debtor, see 11 C. § 101(51D).	□ No.	I am f Code.	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
			☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Pari	4:	Report if You Own or	Have Anv	Hazardo	ous Property or An	y Property That Needs Immediate Attention		
		ou own or have any	■ No.			, ,		
	prop	erty that poses or is ed to pose a threat						
	of im	minent and ifiable hazard to	☐ Yes.	What is	the hazard?			
	Or do	c health or safety? b you own any erty that needs ediate attention?			liate attention is why is it needed?			
	perisi livest or a b	xample, do you own hable goods, or ock that must be fed, building that needs at repairs?		Where is the property?				
	J	•				Number, Street, City, State & Zip Code		

Debtor 1 Thomas J Grillo Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Thomas J Grillo			Case num	nber (if known)			
Par	t 6: Answer These Quest	tions for R	eporting Purposes					
	What kind of debts do you have?	16a.	Are your debts primarily constinuividual primarily for a persona		defined in 11 U.S.C. § 101(8) as "incurred by an			
	•		□ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.		Your debts primarily business debts? Business debts are debts that you incurred to obtain by for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	that are not consumer debts or busin	ness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expens are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000	1 25,001-50,000			
		□ 50-99		☐ 5001-10,000	☐ 50,001-100,000			
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million		☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
				_				
20.	How much do you estimate your liabilities	□ \$0 - \$	50,000 001 - \$100,000	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion			
	to be?		001 - \$100,000	□ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion			
			001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have ex	have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
					ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.			
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).								
		I request	relief in accordance with the chap	oter of title 11, United States Code, s	specified in this petition.			
		bankrupt and 3571	cy case can result in fines up to \$2 I.		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			nas J Grillo s J Grillo	Signature of Del	btor 2			
			e of Debtor 1	3 2 2				
		Executed		Executed on				
			MM / DD / YYYY	N	MM / DD / YYYY			

Debtor 1 Thomas J Grillo		Case	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unit	ed States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.			ledge after an inquiry that the information in the
	/s/ Richard A. Jacoby, Esq.	Date	May 14, 2019
	Signature of Attorney for Debtor		MM / DD / YYYY
	Richard A. Jacoby, Esq.		
	Printed name		
	Jacoby & Jacoby, Attorneys At Law		
	Firm name		
	1737 North Ocean Avenue		
	Medford, NY 11763		
	Number, Street, City, State & ZIP Code		
	Contact phone 631-289-4600	Email address	
	2585735 NY		
	Bar number & State		

Fill	in this information to ider	ntify your cas	se:				
Deb		J Grillo					
Deb	First Name		Middle Name	Last Name			
	use if, filing) First Name		Middle Name	Last Name			
Unit	ed States Bankruptcy Cour	t for the: E	ASTERN DISTRICT	OF NEW YORK			
Cas (if kno						_	c if this is an
						amen	ded filing
Off	icial Form 106S	Sum					
			d Liabilities a	and Certain Statist	tical Information		12/15
Be a infor your	s complete and accurate mation. Fill out all of you original forms, you must	as possible. r schedules f fill out a nev	If two married peop	ble are filing together, both the information on this for eck the box at the top of thi	are equally responsible form. If you are filing amend		
Part	1: Summarize Your As	ssets					
						Your a	ssets of what you own
1.	Schedule A/B: Property 1a. Copy line 55, Total rea	(Official Form al estate, from	106A/B) Schedule A/B			\$	200,000.00
	1b. Copy line 62, Total pe	rsonal proper	ty, from Schedule A/	В		\$	5,625.00
	1c. Copy line 63, Total of	all property or	Schedule A/B			\$	205,625.00
Part	2: Summarize Your Li	abilities					
							abilities
_						Amoun	t you owe
2.	Schedule D: Creditors Wh 2a. Copy the total you liste			<i>rty</i> (Official Form 106D) at the bottom of the last page	of Part 1 of Schedule D	\$	255,469.00
3.	Schedule E/F: Creditors V 3a. Copy the total claims	Vho Have Uns from Part 1 (p	secured Claims (Office oriority unsecured cla	cial Form 106E/F) iims) from line 6e of <i>Schedul</i> e	e <i>E/F</i>	\$	0.00
	3b. Copy the total claims	from Part 2 (r	nonpriority unsecured	d claims) from line 6j of Sched	dule E/F	\$	6,500.00
					Your total liabilities	\$	261,969.00
Part	3: Summarize Your In-	come and Ex	penses				
4.	Schedule I: Your Income (Copy your combined mon			ıle I		\$	3,852.00
5.	Schedule J: Your Expense Copy your monthly expense					\$	4,045.00
Part	4: Answer These Que	stions for Ad	ministrative and St	atistical Records			
6.	Are you filing for bankru ☐ No. You have nothing			3? Check this box and submit the	nis form to the court with yo	ur other scl	hedules.
7.	■ Yes What kind of debt do yo	u have?					
				er debts are those "incurred by 3-9g for statistical purposes. 2		a personal	, family, or
	Your debts are not the court with your of			nave nothing to report on this	part of the form. Check this	s <i>box</i> and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Thomas J Grillo Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,680.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 1	Th	your case and th				
	Thomas J Gr First Name		Name Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle	Name Last Name			
United States Ba	ankruptcy Court for	tne: EASTERN	DISTRICT OF NEW YORK			
Case number						☐ Check if this is a amended filing
Official Ec	orm 106A/B					
_		•				
	<u>le A/B: Pr</u>		an asset only once. If an asset fits in more than			12/15
Answer every que	stion.	·	neet to this form. On the top of any additional p her Real Estate You Own or Have an Interest In	ages, write your name	and case	number (if known).
. Do you own or	have any legal or equ	uitable interest in a	ny residence, building, land, or similar propert	ı?		
□ No. Go to Pa	art 2					
Yes. Where						
	Rd		What is the property? Check all that apply	Do not district		in Du
12 Knoll I	Rd s, if available, or other desc	pription	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of a	ny secured	ims or exemptions. Put I claims on <i>Schedule D:</i> is Secured by Property.
12 Knoll I Street address	s, if available, or other desc		 □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home 	the amount of a	ny secured Have Claim	I claims on Schedule D: as Secured by Property. Current value of the
12 Knoll I Street address	oint NY	11778-0000	☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land	the amount of an Creditors Who h	ny secured Have Claim of the	claims on Schedule D: ss Secured by Property. Current value of the portion you own?
12 Knoll I Street address	s, if available, or other desc		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current value centire property \$200,0	ny secured Have Claim of the ?	claims on Schedule D: ss Secured by Property. Current value of the portion you own?
12 Knoll I Street address	oint NY	11778-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value centire property \$200,0 Describe the national content of the na	ny secured Have Claim of the ?? 100.00 ature of youngle, tena	Current value of the portion you own? \$200,000.00
12 Knoll I Street address	oint NY	11778-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current value centire property \$200,0 Describe the national content of the na	ny secured Have Claim of the ? 100.00 ature of youngle, tena known.	Current value of the portion you own? \$200,000.00 Our ownership interest ency by the entireties, or
12 Knoll I Street address Rocky Po City Suffolk	oint NY	11778-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check or	Current value centire property \$200,0 Describe the na (such as fee sin a life estate), if	ny secured Have Claim of the ? 100.00 ature of youngle, tena known.	Current value of the portion you own? \$200,000.00 Our ownership interest ency by the entireties, or
12 Knoll I Street address Rocky Po	oint NY	11778-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value centire property \$200,0 Describe the ne (such as fee sin a life estate), if Tenancy By	of the ? 000.00 ature of your mple, tenand known. The En	Current value of the portion you own? \$200,000.00 Our ownership interest ency by the entireties, or
Rocky Po	oint NY	11778-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check of Debtor 1 only Debtor 2 only	Current value of entire property \$200,0 Describe the not (such as fee sin a life estate), if Tenancy By	of the ? 000.00 ature of your mple, tenand known. The En	Current value of the portion you own? \$200,000.00 our ownership interest ency by the entireties, of the court.
12 Knoll I Street address Rocky Po City Suffolk	oint NY	11778-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about thi	Current value of entire property \$200,0 Describe the not (such as fee sin a life estate), if Tenancy By	of the ? 000.00 ature of your mple, tenand known. The En	Current value of the portion you own? \$200,000.00 our ownership interest ancy by the entireties, outlined.

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Deb	otor 1 <u>T</u>	homas J Grillo		Case	number (if known)		
3. C	ars, vans,	trucks, tractors, spo	ort utility vehicles, motorcycles				
	l No						
	Yes						
3.1	Make:	Toyota	Who has an interest in the property?	Check one		claims or exemptions. Put red claims on Schedule D:	
	Model:	Corolla		■ Debtor 1 only the amo			
	Year:	2009	Debtor 2 only		Current value of the	Current value of the	
	Approxin	nate mileage:	☐ Debtor 1 and Debtor 2 only		entire property?	portion you own?	
	Other inf	ormation:	At least one of the debtors and anot	her			
			Check if this is community proper (see instructions)	rty	\$1,625.00	\$1,625.00	
	<i>kamples:</i> B │No │Yes	oats, trailers, motors,	personal watercraft, fishing vessels, snowmobiles	, motorcycle acce	essories		
			tion you own for all of your entries from Part 2, art 2. Write that number here			\$1,625.00	
Part	3: Descri	be Your Personal and	Household Items				
			equitable interest in any of the following items	?		Current value of the portion you own? Do not deduct secured claims or exemptions.	
<i>E</i>			ngs niture, linens, china, kitchenware				
	- 100. D0					¢4 500 00	
		Hous	ehold Goods			\$1,500.00	
E		Televisions and radio	s; audio, video, stereo, and digital equipment; com , cameras, media players, games	nputers, printers,	scanners; music collec	tions; electronic devices	
	■ No] Yes. De	scribe					
8. C	ollectibles	s of value			:		
_		other collections, mer	s; paintings, prints, or other artwork; books, picture norabilia, collectibles	es, or other art ob	jects; stamp, coin, or b	aseball card collections;	
	Yes. De	scribe					
E	Examples:	for sports and hobb Sports, photographic, musical instruments	ies exercise, and other hobby equipment; bicycles, po	ool tables, golf cl	ubs, skis; canoes and k	sayaks; carpentry tools;	
	■ No I Yes. De	scribe					
_	Firearms <i>Examples</i> ■ No	: Pistols, rifles, shotgu	ns, ammunition, and related equipment				
	■ No] Yes. De	scribe					

Debtor 1	Thomas J G	rillo	Case number (if known)
11. Clothe	es			
		othes, furs, leather coats	, designer wear, shoes, accessories	
☐ No				
Yes	. Describe			
		Wassing Append		¢1 000 00
		Wearing Apparel		\$1,000.00
12. Jewel		walmi aaatuma jawalmi a	engagement rings, wedding rings, heirloom jewelry, watches, gems,	and oilver
□ No	ipies. Everyday je	weiry, costume jeweiry, e	engagement rings, wedding rings, neindorn jeweiry, watches, gerns,	gold, Sliver
	. Describe			
_ 103	. Describe			
		Jewelry		\$400.00
13. Non-f a	arm animals			
_Exam	nples: Dogs, cats,	birds, horses		
■ No				
☐ Yes	. Describe			
14. Any o	ther personal an	d household items you	did not already list, including any health aids you did not list	
■ No				
	. Give specific infe	ormation		
	•			
15 Add	the dollar value	of all of your entries fro	om Part 3, including any entries for pages you have attached	
				\$2,900.00
Don't do D	ib- V Fi	sial Assats		
	escribe Your Finan		st in any of the following?	Current value of the
Do you o	wii oi iiave aiiy i	egai or equitable intere	st in any or the ronowing :	portion you own?
				Do not deduct secured
				claims or exemptions.
16. Cash				
_	nples: Money you l	have in your wallet, in yo	ur home, in a safe deposit box, and on hand when you file your peti	tion
■ No				
⊔ Yes				
17. Depos	sits of money			
Exam	nples: Checking, sa		accounts; certificates of deposit; shares in credit unions, brokerage	houses, and other similar
□ No	institutions.	If you have multiple acco	ounts with the same institution, list each.	
			Institution name:	
— 168				
		17.1.	Checking & Savings Sterling	\$1,100.00
		17.1.	Oncoking a cavings of thing	Ψ1,100.00
		or publicly traded stock	ks th brokerage firms, money market accounts	
■ No	ipies. Bona fanas,	investment accounts wit	in blokerage limis, money market accounts	
		Institution or iss	suer name:	
□ 162		oao o. loc		
		ock and interests in inc	corporated and unincorporated businesses, including an intere	st in an LLC, partnership, and
-	venture			
■ No				
⊔ Yes	. Give specific infe	ormation about them		
		Name of entity:	% of ownership:	
20. Gover	nment and corpo	orate bonds and other i	negotiable and non-negotiable instruments	
			s, cashiers' checks, promissory notes, and money orders. ot transfer to someone by signing or delivering them.	
■ No	.ogoudoio manum	ionio aro aroso you cariff	or delivering them.	
- 110				

De	ebtor 1	Thomas J Grillo	Case numbe	er (if known)
	☐ Yes.	Give specific information about them Issuer name:		
21.		ment or pension accounts oles: Interests in IRA, ERISA, Keogh, 4	401(k), 403(b), thrift savings accounts, or other pension or pro	ofit-sharing plans
		List each account separately. Type of account:	Institution name:	
22.	Your s	ty deposits and prepayments share of all unused deposits you have r oles: Agreements with landlords, prepa	made so that you may continue service or use from a compar aid rent, public utilities (electric, gas, water), telecommunicatio	ny ons companies, or others
	■ No □ Yes.		Institution name or individual:	
23.	Annuit	ies (A contract for a periodic payment	of money to you, either for life or for a number of years)	
	■ No □ Yes	Issuer name and descri	iption.	
24.	26 U.S.	ts in an education IRA, in an accoun C. §§ 530(b)(1), 529A(b), and 529(b)(1	nt in a qualified ABLE program, or under a qualified state	tuition program.
	■ No □ Yes	Institution name and de	escription. Separately file the records of any interests.11 U.S.C	C. § 521(c):
	■ No	, equitable or future interests in property. Give specific information about them.	perty (other than anything listed in line 1), and rights or p	powers exercisable for your benefit
	Patent	s, copyrights, trademarks, trade sec	crets, and other intellectual property	
	■ No	Over: Internet domain names, websites,	, proceeds from royalties and licensing agreements	
		es, franchises, and other general in		
_,.			es, cooperative association holdings, liquor licenses, professi	ional licenses
	☐ Yes.	Give specific information about them.		
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.		funds owed to you		
	■ No □ Yes.	Give specific information about them,	including whether you already filed the returns and the tax ye	ears
29.		r support o <i>les</i> : Past due or lump sum alimony, sp	pousal support, child support, maintenance, divorce settlemer	nt, property settlement
		Give specific information		
30.		amounts someone owes you oles: Unpaid wages, disability insuranc benefits; unpaid loans you made	ce payments, disability benefits, sick pay, vacation pay, worke to someone else	ers' compensation, Social Security
	■ No □ Yes.	Give specific information		
31.	Exam	sts in insurance policies oles: Health, disability, or life insurance	e; health savings account (HSA); credit, homeowner's, or rent	er's insurance
	■ No □ Yes.	Name the insurance company of each		
Off	icial For	Company name m 106A/B	e: Beneficiary: Schedule A/B: Property	Surrender or refund page 4

Debtor 1	Thomas J Grillo	Case number (if known)	
			value:
If yo	interest in property that is due you from someone who has ou are the beneficiary of a living trust, expect proceeds from a life eone has died.		eive property because
	s. Give specific information		
Exai	ms against third parties, whether or not you have filed a laws mples: Accidents, employment disputes, insurance claims, or rig		
■ No □ Ye	s. Describe each claim		
34. Othe ■ No	er contingent and unliquidated claims of every nature, includ	ling counterclaims of the debtor and rights to	set off claims
	s. Describe each claim		
35. Any 1	financial assets you did not already list		
☐ Ye	s. Give specific information		
	d the dollar value of all of your entries from Part 4, including Part 4. Write that number here		\$1,100.00
Part 5:	Describe Any Business-Related Property You Own or Have an Intere	st In. List any real estate in Part 1.	
37. Do yo	u own or have any legal or equitable interest in any business-related	I property?	
No.	Go to Part 6.		
☐ Yes.	. Go to line 38.		
	Describe Any Farm- and Commercial Fishing-Related Property You Off you own or have an interest in farmland, list it in Part 1.	Own or Have an Interest In.	
46. Do y	ou own or have any legal or equitable interest in any farm- o	or commercial fishing-related property?	
■ N	lo. Go to Part 7.		
ПΥ	es. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above	
	ou have other property of any kind you did not already list? mples: Season tickets, country club membership		
■ No			
☐ Ye	s. Give specific information		
54. Add	d the dollar value of all of your entries from Part 7. Write tha	t number here	\$0.00

Deb	tor 1 Thomas J Grillo	Thomas J Grillo					
Part	8: List the Totals of Each Part of this Form						
55.	Part 1: Total real estate, line 2			\$200,000.00			
56.	Part 2: Total vehicles, line 5	\$1,625.00					
57.	Part 3: Total personal and household items, line 15	\$2,900.00					
58.	Part 4: Total financial assets, line 36	\$1,100.00					
59.	Part 5: Total business-related property, line 45	\$0.00					
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00					
61.	Part 7: Total other property not listed, line 54 +	\$0.00					
62.	Total personal property. Add lines 56 through 61	\$5,625.00	Copy personal property total	\$5,625.00			
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$205,625.00			

		nation to identify your ca					
De	btor 1	Thomas J Grillo First Name	Middle Name	L	ast Name		
	btor 2	- N	Million N				
(Spo	ouse if, filing)	First Name	Middle Name		ast Name		
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF N	EW Y	ORK		
	se number _ nown)					☐ Check if this is an amended filing	
Of	ficial Fo	rm 106C				-	
			perty You Cla	im	as Exempt	4/19	
the nee	property you li	sted on <i>Schedule A/B: Pro</i> d attach to this page as ma	perty (Official Form 106A/B)	as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and	
spe any func exe	cific dollar an applicable st ds—may be u mption to a p	nount as exempt. Alterna atutory limit. Some exem nlimited in dollar amoun	itively, you may claim the f iptions—such as those for t. However, if you claim an	ull fa heal exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement	
Pa	rt 1: Identif	y the Property You Claim	as Exempt				
1.	Which set of	exemptions are you clai	ming? Check one only, eve	n if yc	our spouse is filing with you.		
	☐ You are cla	aiming state and federal no	onbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	You are cla	aiming federal exemptions	. 11 U.S.C. § 522(b)(2)				
2.	For any prop	erty you list on Schedule	e A/B that you claim as exe	empt,	fill in the information below.		
	Brief descripti	on of the property and line of that lists this property	•	•	ount of the exemption you claim	Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	2009 Toyot		\$1,625.00		\$1,625.00	11 U.S.C. § 522(d)(2)	
	Line from Sch	nedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
	Household		\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)	
	Line from Scr	nedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	Wearing Ap	pparel pedule A/B: 11.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)	
	Line from Scr	leaule AVB. 11.1			100% of fair market value, up to any applicable statutory limit		
	Jewelry		\$400.00		\$400.00	11 U.S.C. § 522(d)(4)	
	Line from Sch	nedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit		
		Savings Sterling	\$1,100.00		\$1,100.00	11 U.S.C. § 522(d)(5)	

Official Form 106C

□ 100% of fair market value, up to any applicable statutory limit

De	btor 1	Thomas J Grillo	Case number (if known)	
3.		you claiming a homestead exemption of more than \$170,350? ject to adjustment on 4/01/22 and every 3 years after that for cases filed o		
		No		
		Yes. Did you acquire the property covered by the exemption within 1,215	days before you filed this case?	
		□ No		
		☐ Yes		

Official Form 106C

Fill in this informat	tion to identify you	r case:			
Debtor 1	Thomas J Grillo First Name	Middle Name Last Name			
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bankr	ruptcy Court for the:	EASTERN DISTRICT OF NEW YORK			
Case number				_	if this is an ded filing
Official Form	106D				
		Who Have Claims Secure	ed by Property	y	12/15
		f two married people are filing together, both are out, number the entries, and attach it to this form.			
1. Do any creditors ha	ve claims secured by	your property?			
☐ No. Check th	is box and submit the	nis form to the court with your other schedules.	You have nothing else to	report on this form.	
Yes. Fill in al	l of the information	pelow.			
Part 1: List All S	Secured Claims				
for each claim. If more	than one creditor has	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Mr. Cooper		Describe the property that secures the claim:	\$255,469.00	\$200,000.00	\$55,469.00
Creditor's Name		12 Knoll Rd Rocky Point, NY 11778 Suffolk County			
8950 Cypres	ss Waters	As of the date you file, the claim is: Check all that			
Blvd Coppell, TX	75019	apply.			
	ty, State & Zip Code	☐ Contingent ☐ Unliquidated			
rumbor, Gurbor, Gu	y, otato a zip ocao	☐ Disputed			
Who owes the debt	? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only		car loan)			
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the	debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this clain community debt	n relates to a	Other (including a right to offset) Mortgage	•		
Date debt was incurre	Opened 6/01/08 Last Active 10/01/10	Last 4 digits of account number 7940)		
Add the dollar value	e of vour entries in C	olumn A on this page. Write that number here:	\$255,46	9 00	
	ge of your form, add	the dollar value totals from all pages.	\$255,46		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

= 20 to 4	this inform									
Fill in	this inform	ation to identify your	case:							
Debtor	· 1	Thomas J Grillo								
Debtor	. 2	First Name	Middle Na	me	Last Name					
(Spouse		First Name	Middle Na	me	Last Name					
United	States Ban	kruptcy Court for the:	EASTERN D	ISTRICT OF NEW	YORK					
		., .,								
Case n	number 			-					П	Check if this is an
(,								_	amended filing
										, and the second
		106E/F								
		F: Creditors W								12/15
any exec Schedul Schedul left. Atta	cutory contra le G: Executo le D: Credito ach the Conti nd case num	acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sec inuation Page to this pag ber (if known).	that could resu ired Leases (Of ured by Propert je. If you have n	It in a claim. Also list ficial Form 106G). Do y. If more space is ne o information to repo	executory of not include eded, copy t	ontracts on tracts on tracts on the contract of the contract o	on Sche tors with ou need,	dule A/B: Pro partially se fill it out, no	operty (Offic cured claims umber the er	s that are listed in stries in the boxes on the
Part 1:		of Your PRIORITY Un								
_	-	s have priority unsecure	d claims agains	t you?						
	No. Go to Pa	rt 2.								
	Yes.	of Vour NONDBIODIT	'V Uncooured	Claima						
Part 2:		of Your NONPRIORIT								
_	•	s have nonpriority unsec	_	<u>-</u>						
		e nothing to report in this p	art. Submit this fo	orm to the court with yo	our other sche	edules.				
	Yes.									
uns	secured claim n one credito	nonpriority unsecured classifies the creditor separately report of a particular claim, li	y for each claim.	For each claim listed, is	dentify what t	ype of clai	m it is. D	o not list clair	ms already in	cluded in Part 1. If more
i ai	12.									Total claim
4.1	Chase			Last 4 digits of accou	ınt number	5464				\$6,500.00
		Creditor's Name						_		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	P.O. Box	: 15123 ton, DE 19850-5123		When was the debt in	ncurred?	2015				_
		eet City State Zip Code		As of the date you file	e, the claim i	s: Check a	all that ap	pply		
	Who incurr	red the debt? Check one.								
	Debtor 1	only		☐ Contingent						
	Debtor 2	2 only		☐ Unliquidated						
	Debtor 1	and Debtor 2 only		☐ Disputed						
	☐ At least	one of the debtors and and	Strict	Type of NONPRIORIT	Y unsecured	l claim:				
		f this claim is for a comr	ilullity	Student loans						
	debt Is the claim	subject to offset?		Obligations arising report as priority claims		ration agre	eement o	r divorce tha	t you did not	
	■ No	,		☐ Debts to pension or		g plans, aı	nd other:	similar debts		
	☐ Yes			Other. Specify Cr	edit					
	— 100			- Other. Specify						_
Part 3:	List Oth	ners to Be Notified Ab	out a Debt Th	at You Already Lis	ted					
5. Use the is trying have	nis page only ing to collect more than o		e notified about owe to someor debts that you	your bankruptcy, for ne else, list the origina listed in Parts 1 or 2,	a debt that y al creditor in	Parts 1 o	r 2, then	list the coll	ection agend	
Part 4:	Add the	Amounts for Each T	ype of Unsecu	ıred Claim						
	the amounts	s of certain types of unse I claim.	ecured claims. T	his information is for	statistical re	eporting p	urposes	only. 28 U.	S.C. §159. Ad	dd the amounts for each
								Total Cla	im	
		6a. Domestic support of	obligations			6a.	\$		0.00	<u>) </u>

Official Form 106 E/F

Debtor 1 Thomas J Grillo		Case number (if known)				
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00		
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00		
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00		
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00		
			T	otal Claim		
6f.	Student loans	6f.	\$	0.00		
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00		
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00		
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	6,500.00		
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	6,500.00		
	6b. 6c. 6d. 6e. 6f. 6g. 6h. 6i.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 66.	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6b. \$ 6c. \$ 6d. \$		

Fill in this infor	mation to identify your	case:		
Debtor 1	Thomas J Grillo			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F NEW YORK	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

		Name, Number	, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

Official Form 106G

Fill in this inf	formation to identify your	00001			
	formation to identify your	case.			
Debtor 1	Thomas J Grillo First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case number	·				
(if known)					Check if this is an
					amended filing
Official F	Form 106H				
	le H: Your Cod	ehtors			12/15
Jeneau	ie II. Tour God	CDIOIS			12/13
	d case number (if known u have any codebtors? (If			e as a codebtor.	
-	(you are iming a joint oace,	ao	. 40 4 004021011	
■ No					
☐ Yes					
	the last 8 years, have you California, Idaho, Louisiana				ty states and territories include)
■ No. Go	to line 2				
_	id your spouse, former spo	use, or legal equivalent live	e with you at the time?		
	.,,,,,	3	, , , , , , , , , , , , , , , , , , , ,		
in line 2 a	again as a codebtor only 6D), Schedule E/F (Officia	if that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown he creditor on Schedule D (Officia , Schedule E/F, or Schedule G to fi
	lumn 1: Your codebtor le, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
Nam	ne			☐ Schedule E/F,	
				☐ Schedule G, lir	
Num	nber Street				
City		State	ZIP Code		
3.2				☐ Schedule D, lir	ne
Nam	ne			Schedule E/F,	· · · · · · · · · · · · · · · · · · ·
				☐ Schedule G, lir	
Num	nber Street				
City		State	ZIP Code		

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Fill	in this information to identify your o	case:							
	btor 1 Thomas J C								
	btor 2 buse, if filing)				_				
Un	ited States Bankruptcy Court for the	e: EASTERN DISTRICT	OF NEW YORK		_				
	se number 		-			Check if this is: An amende A supplementation	d filing		chapter
O	fficial Form 106I					MM / DD/ Y		ng date.	
	chedule I: Your Inc	ome				IVIIVI / DD/ T	111		12/15
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	i are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your s ith you, do not includ	pouse i le infori	is living	with you, incluated inclusions with your spoot your spoot your spoot about your spoot included including the spoot included including the spoot included including the spoot including the	ude informatio ouse. If more s	n about pace is r	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing s	spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed	■ Employed			■ Employed		
		Employment status	☐ Not employed			☐ Not e	mployed		
		Occupation	Disabled			Disable	d		
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pa	rt 2: Give Details About Mo	nthly Income							
	imate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to re	port for	any line	e, write \$0 in the	space. Include	your nor	n-filing
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	for all e	employe	ers for that perso	n on the lines b	elow. If y	ou need
					Fo	or Debtor 1	For Debtor 2 non-filing sp		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	0.00	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0.00	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Thomas J Grillo	-	Cas	e number (if known)			
	Cor	by line 4 here	4.	Fo	r Debtor 1		Debtor 2 or n-filing spouse 0.00	
		-	٦.	Ψ_	0.00	Ψ	0.00	<u>'</u>
5.		all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.		0.00	\$_	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	: -	0.00	\$_	0.00	_
	5c.	Voluntary contributions for retirement plans	5c.		0.00	\$_	0.00	_
	5d.	Required repayments of retirement fund loans	5d.		0.00	\$_	0.00	
	5e.	Insurance	5e.		0.00	\$_	0.00	
	5f.	Domestic support obligations	5f.	\$_	0.00	* <u></u>	0.00	_
	5g.	Union dues	5g.		0.00	*	0.00	
	5h.	Other deductions. Specify:	_ 5h.	+ \$_	0.00	+ \$	0.00	<u>)</u>
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$_	0.00	<u>) </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00)
	8b.	Interest and dividends	8b.		0.00	\$_	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	_
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00)
	8e.	Social Security	8e.	\$	0.00	\$	535.00)
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: SSI Pension or retirement income	8f. 8g.	\$ \$	1,637.00 0.00	\$	0.00 0.00	
	8h.	Other monthly income. Specify: Workers Comp	8h.	+ \$ _	1,680.00	+ \$	0.00)
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	3,317.00	\$_	535.0	00
10	Cald	culate monthly income. Add line 7 + line 9.	10.	£	3,317.00 + \$		535.00 = \$	3,852.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			3,317.00	`		3,032.00
11.	Inclu othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not a cify:	depe		. •	•	Schedule J. 11. +\$	0.00
12.		It the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certain					12. \$	3,852.00
13.	Do y	you expect an increase or decrease within the year after you file this form	?				Combi	ined ly income
		No. Yes. Explain:						

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Deb	tor 1 Thomas J Grillo		Che	eck if this is:	
Deb	tor 2			An amended filing A supplement show	ving postpetition chapter
(Sp	buse, if filing)		_	13 expenses as of	
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YOR	RK		MM / DD / YYYY	
	e number				
(If k	nown)				
O.	fficial Form 106J				
S	chedule J: Your Expenses				12/15
Be	as complete and accurate as possible. If two married people are formation. If more space is needed, attach another sheet to this for nber (if known). Answer every question.	filing together, bot rm. On the top of a	th are equany additi	ually responsible fo ional pages, write y	or supplying correct your name and case
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses fo	r Separate Househ	old of Del	otor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relatio Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				□ Yes □ No
					☐ Yes
	-				□ No
	-				☐ Yes
					□ No □ Yes
3.	Do your expenses include ■ No				— 100
	expenses of people other than yourself and your dependents?				
Est	Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless you enses as of a date after the bankruptcy is filed. If this is a supple plicable date.				
the	lude expenses paid for with non-cash government assistance if you value of such assistance and have included it on <i>Schedule I: You</i> ficial Form 106I.)			Your expe	enses
(0)	iciai Form 1001.)				
4.	The rental or home ownership expenses for your residence. Incl payments and any rent for the ground or lot.	lude first mortgage	4.	\$	1,500.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.		0.00
	4c. Home maintenance, repair, and upkeep expenses4d. Homeowner's association or condominium dues		4c. 4d.	·	0.00
5.	Additional mortgage payments for your residence, such as home	e equity loans	4a. 5.	·	0.00

6. Utilities: Sa. Electricity, heat, natural gas Sa.	Deb	tor 1 Thomas J Grillo	Case number	(if known)
8b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 75.00 6d. Other, Specity: Cell Phone Cablevision 7. Food and housekeeping supplies 7. Food and housekeeping supplies 8. Childcare and children's education costs 8. \$ 0.00 8. Childcare and children's education costs 9. \$ 125.00 10. Personal care products and services 10. \$ 150.00 11. Medicial and dental expenses 11. \$ 150.00 12. Transportation. Include gas, maintenance, bus of train fare. 12. \$ 250.00 13. Entertainment, clube, recreation, newspapers, magazines, and books 13. \$ 100.00 14. Charitable contributions and religious donations 14. \$ 50.00 15a. Life insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 80.00 15b. Health insurance 15c. \$ 10.00 15d. Other insurance, specify: 15d. \$ 0.00 15d. Other insurance, specify: 15d. \$ 0.00 15d. There insurance insuran	6.	Utilities:		
8b. Water, saver, garbage collection 6c. Telephone, cell phone, linternet, statellite, and cable services 6c. \$ 75.00 8c. Cablevision 7. Food and housekeeping supplies 7. Food and housekeeping supplies 8. Childcare and children's education costs 8. Childcare and children's education costs 9. \$ 750.00 8c. Childcare and children's education costs 9. \$ 125.00 9. Clothing, laundry, and dry cleaning 9. \$ 125.00 10. Personal care products and services 10. \$ 150.00 11. Medical and dental expension 11. \$ 150.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$ 250.00 13c. The intertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 100.00 14. Charitable contributions and religious donations 14. \$ 50.00 15. Insurance. 15. Life insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 80.00 15b. Health insurance 15c. \$ 110.00 15d. Other insurance, specity. 15d. \$ 0.00 15d. Other insurance, specity.	-	6a. Electricity, heat, natural gas	6a. \$	520.00
6d. Chter. Specity: Cell Phone Cablevision Childcare and childrein's education costs Childcare and childrein's education costs Childcare and childrein's education costs Clothing, laundry, and dry cleaning Clothing, laundry, lau		6b. Water, sewer, garbage collection	6b. \$	30.00
Cablevision S 8.5.00		6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	75.00
Cablevision \$ 8.5.00		6d. Other. Specify: Cell Phone	6d. \$	70.00
8. Childcare and children's education costs 0. Clothing, laundry, and dry cleaning 9. \$ 125.00 10. Personal care products and services 10. \$ 150.00 11. Medical and dental expenses 11. \$ 150.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$ 250.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 100.00 14. Charitable contributions and religious donations 15. Insurance. 16. Charitable contributions and religious donations 16. Leadin insurance deducted from your pay or included in lines 4 or 20. 16. Leadin insurance deducted from your pay or included in lines 4 or 20. 16. Leadin insurance specify: 16. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 17. Care payments or vehicle 1 156. \$ 0.00 18. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 18. People insurance. Specify: 17. Care payments for Vehicle 1 17a. \$ 0.00 17b. Care payments for Vehicle 1 17a. \$ 0.00 17c. Other, Specify: 17d. Oth			\$	85.00
1. Clothing, laundry, and dry cleaning 9, \$ 125,00	7.	Food and housekeeping supplies	7. \$	750.00
10. Personal care products and services 10. \$ 150.00 11. Medical and dental expenses 11. \$ 150.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 100.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. \$ 110.00 15c. Vehicle insurance 15c. \$ 110.00 15d. Other insurance. Specify: 15c. Vehicle insurance. 1	8.	Childcare and children's education costs	8. \$	0.00
11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 250.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. S 0.00 15b. Health insurance 15c. Vehicle insurance educted from your pay or included in lines 4 or 20. 15c. Vehicle insurance 15c. Vehicle insurance 15d. S 110.00 15c. Vehicle insurance 15d. S 110.00 15d. Traxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of unique payor included in lines 4 or 20. Specify: 20. Other repayments of unique payor included in lines 4 or 20. Specify: 21c. Other repayments of vehicle 2 21c. Add include taxes deducted from your pay or included in lines 4 or 20. 21d. Other payments of vehicle 2 21d. Other payments of vehicle 3 21d. Other payments of vehicle 4 21d. Other	9.	Clothing, laundry, and dry cleaning	9. \$	125.00
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•	24.	For example, do you expect to finish paying for your car loan within the year or do you expect yo modification to the terms of your mortgage?		
☐ Yes. Explain here:		-		
		Yes. Explain here:		

Fill in this infor	mation to identify your	case:		
Debtor 1	Thomas J Grillo First Name	Middle Name	Last Name	
Debtor 2	i ii st i vairie	MIGGIE NATITE	Last Haille	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK	
Case number (if known)				☐ Check if this is an
				amended filing
You must file the	is form whenever you fi	le bankruptcy schedules n connection with a bank		nformation. ng a false statement, concealing property, or s up to \$250,000, or imprisonment for up to 20
Sig	ın Below			
Did you pa	ay or agree to pay some	one who is NOT an attori	ney to help you fill out bankr	uptcy forms?
■ No				
☐ Yes.	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sumi	mary and schedules filed with	n this declaration and
X /s/ The	omas J Grillo		X	
	as J Grillo ure of Debtor 1		Signature of Debto	or 2
Date	May 14, 2019		Date	

Official Form 106Dec

Fill	in this in	formation to identify your	case:			
De	btor 1	Thomas J Grillo				
De	btor 2	First Name	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States	Bankruptcy Court for the:	EASTERN DISTRICT C	OF NEW YORK		
	se numbei nown)					Check if this is an amended filing
St Be	ateme	ete and accurate as possik	ole. If two married people	iduals Filing for E	e equally responsible for su	
nun	nber (if kn	If more space is needed, a own). Answer every ques ve Details About Your Mar	tion.	o this form. On the top of an	y additional pages, write yo	our name and case
1.	What is	your current marital status	s?			
	■ Mar	ried married				
2.	During t	he last 3 years, have you l	ived anywhere other thai	n where you live now?		
	■ No					
	_	. List all of the places you liv	ved in the last 3 years. Do	not include where you live now	N.	
	Debtor	1 Prior Address:	Dates Debtor lived there	1 Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
3. stat				egal equivalent in a commu levada, New Mexico, Puerto R		
	■ No □ Yes	. Make sure you fill out <i>Sch</i>	edule H: Your Codebtors (Official Form 106H).		
Pa	rt 2 Ex	plain the Sources of Your	Income			
4.	Fill in the	total amount of income you	received from all jobs and	ing a business during this y d all businesses, including par ive together, list it only once u	t-time activities.	endar years?
	■ No					
	☐ Yes	. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Official Form 107

20	111	Ullias J G	illo					ise number (ii known)		
5.	Include include and other	come regard public bene	lless of wheth fit payments;	ner that incompensions; re	ental income; inter	imples of est; divid	other income are ends; money colle	alimony; child supp	royalties; an	security, unemployment, and gambling and lottery
	List each	source and t	the gross inco	ome from ea	ch source separat	ely. Do n	ot include income	that you listed in lir	ne 4.	
	□ No									
	_	Fill in the de	etails.							
				Debtor 1				Debtor 2		
				Sources of Describe b		each s	income from source e deductions and ions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
		1 of curre	nt year until nkruptcy:	ss and c	omp	\$16,585.00				
	r last calen inuary 1 to	dar year: December	31, 2018)	ss and c	omp		\$39,804.00			
		dar year be December		ss and c	omp		\$39,804.00			
	■ Yes.	During the No. Yes * Subject Debtor 1 c During the	90 days before Go to line 7 List below expaid that condition and include to adjustment or Debtor 2 of the condition of the co	pre you filed ceach creditor editor. Do no payments to t on 4/01/22 or both have pre you filed	r to whom you paid out include paymen on an attorney for the and every 3 years or primarily consu	d you pay d a total o ts for dor his bankru s after tha	of \$6,825* or more nestic support obluptcy case. It for cases filed on		rments and t illd support a f adjustment	he total amount you and alimony. Also, do t.
		□ Yes	include pay		omestic support ol			nd the total amount pport and alimony.		t creditor. Do not include payments to an
	Creditor'	s Name and	d Address		Dates of payme	nt	Total amount paid	Amount you still owe	Was this	payment for
7.	Insiders in of which y a business alimony.	clude your r ou are an of s you operat	elatives; any ficer, director	general pari , person in c roprietor. 11	tners; relatives of control, or owner o	any gene f 20% or	nt on a debt you or ral partners; partn more of their votir	owed anyone who erships of which yo	u are a gene ny managing	eral partner; corporations agent, including one for
		Name and			Dates of payme	nt	Total amount	Amount you	Reason fo	or this payment
							paid	still owe		

DCI	I IIIOIIIas J GIIIIO			se number (# kho					
8.	Within 1 year before you filed for bankrunt	cy, did you make any na	vments or transfer a	any property o	n account of a d	aht that hanafitad an			
0.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.								
	■ No □ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still ow		this payment litor's name			
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures							
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No								
	Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of th	e case			
	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11.		erty repossessed, f	oreclosed, gar	rnished, attached	d, seized, or levied?			
	Yes. Fill in the information below.								
	Creditor Name and Address Describe the Property				ate	Value of the property			
		Explain what happene	ed						
	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		cluding a bank or fir	nancial institut	ion, set off any a	amounts from your			
	Creditor Name and Address	Describe the action th	e creditor took		ate action was ken	Amount			
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?								
	■ No								
	☐ Yes								
Par	t 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gif	ts with a total value	of more than \$	\$600 per person'	?			
	Gifts with a total value of more than \$600 per person	Describe the gifts	3		ates you gave e gifts	Value			
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankrup ■ No	tcy, did you give any gif	ts or contributions v	with a total val	ue of more than	\$600 to any charity?			
	Yes. Fill in the details for each gift or con	tribution.							
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al Describe what yo	u contributed	ates you ontributed	Value				
Do	t 6. List Cartain Lagge								

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Deb	totor 1 Thomas J Grillo		Case number (if known)					
	or gambling?							
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and how the loss occurred	Include the	any insurance coverage for the lo e amount that insurance has paid. Li claims on line 33 of Schedule A/B: I	ist pending	Date of your loss	Value of property lost		
Par	t 7: List Certain Payments or Transfer	S						
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	preparing a	a bankruptcy petition?			rty to anyone you		
	□ No■ Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
	Jacoby & Jacoby, Attorneys At Lav 1737 North Ocean Avenue Medford, NY 11763		Attorney Fees		5/10/19	\$1,100.00		
17.	Within 1 year before you filed for bankrupromised to help you deal with your cre Do not include any payment or transfer tha No Yes. Fill in the details.	ditors or to	make payments to your creditors		r transfer any prope	rty to anyone who		
	Person Who Was Paid Address		Description and value of any proper cansferred	erty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have all No Yes. Fill in the details.	ur business s made as s	s or financial affairs? security (such as the granting of a se					
	Person Who Received Transfer Address		escription and value of roperty transferred		ny property or received or debts	Date transfer was made		
	Person's relationship to you			paid iii exe	mungo			
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset ■ No □ Yes. Fill in the details.			elf-settled tru	st or similar device	of which you are a		
	Name of trust	D	escription and value of the prope	rty transferre	ed	Date Transfer was made		

Case number (if known)

Pai	t 8: List of Certain Financial Accounts, Inst	ruments Safe Denosit Boxes and S	torage Units					
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	were any financial accounts or inst	ruments held in your name, on the source of deposit; shares in banks					
	Name of Financial Institution and	Last 4 digits of Type of account number instrument	unt or Date account wo closed, sold, moved, or transferred	as Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed for bankruptcy, a	ny safe deposit box or other	depository for securities,				
	No The state of th							
	Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)							
Pai	t 9: Identify Property You Hold or Control fo	or Someone Fise						
	Do you hold or control any property that som for someone.		rty you borrowed from, are s	storing for, or hold in trust				
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Pai	t 10: Give Details About Environmental Infor	mation						
	the purpose of Part 10, the following definition							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface water, groun						
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	•	law, whether you now own,	operate, or utilize it or used				
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, o		s waste, hazardous substand	ce, toxic substance,				
Rep	ort all notices, releases, and proceedings that	you know about, regardless of whe	n they occurred.					
24.	Has any governmental unit notified you that y	ou may be liable or potentially liable	under or in violation of an e	environmental law?				
	■ No							
	Yes. Fill in the details.			B				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	Environmental law, if y know it	ou Date of notice				

Debtor 1 Thomas J Grillo

Del	otor 1	Thomas J Grillo		Case number (if known)						
25.	Have	you notified any governmental unit o	of any release of hazardous material?							
	_	M-								
	_	No Yes. Fill in the details.								
		ne of site	Governmental unit	Environmental law, if you	Date of notice					
	Add	ress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	know it						
26.	Have	you been a party in any judicial or ad	Iministrative proceeding under any envir	onmental law? Include settlements	and orders					
-0.	_	you boon a party in any judicial of ac	g and a processing and any one	omnomariam i morado como momo	and orderer					
	_	No								
		Yes. Fill in the details. e Title	Court or agoney	Nature of the case	Status of the					
		e Number	Court or agency Name	Nature of the case	case					
			Address (Number, Street, City, State and ZIP Code)							
Pai	rt 11:	Give Details About Your Business of	r Connections to Any Business							
			•	, of the following connections to an	w business?					
21.			otcy, did you own a business or have any	, G	iy business?					
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
		☐ A partner in a partnership								
		☐ An officer, director, or managing executive of a corporation								
		An owner of at least 5% of the voti	ng or equity securities of a corporation							
		No. None of the above applies. Go to	Part 12.							
		Yes. Check all that apply above and fill in the details below for each business.								
		iness Name	Describe the nature of the business Employer Identification number Do not include Social Security number							
	Address (Number, Street, City, State and ZIP Code)		Name of accountant or bookkeeper		number or ITIN.					
				Dates business existed						
28.		Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.								
		No								
		Yes. Fill in the details below.								
	Nam	ne ress	Date Issued							
		ber, Street, City, State and ZIP Code)								
Pai	rt 12:	Sign Below								
are with 18 U	true a a bai J.S.C. Thon	nd correct. I understand that making a nkruptcy case can result in fines up to §§ 152, 1341, 1519, and 3571. nas J Grillo	inancial Affairs and any attachments, and a false statement, concealing property, co \$250,000, or imprisonment for up to 20	or obtaining money or property by f						
		J Grillo e of Debtor 1	Signature of Debtor 2							
		ay 14, 2019	Date							
Did	vou a	ttach additional pages to Your Statem	nent of Financial Affairs for Individuals F	iling for Bankruptev (Official Form	107)?					
I N	-			g	, .					
□ Y	'es									
Did ■ N		ay or agree to pay someone who is no	ot an attorney to help you fill out bankru	otcy forms?						
_		ame of Person Attach the Bankr	ruptcy Petition Preparer's Notice, Declaratio	n, and Signature (Official Form 119).						
Offic	ial Forr	n 107 State	ment of Financial Affairs for Individuals Filing	for Bankruptcy	page 6					

Debtor 1 Thomas J Grillo Case number (if known)

Fill in this inform	nation to identify your	case:		
Debtor 1	Thomas J Grillo			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTR	RICT OF NEW YORK	
Case number				☐ Check if this is an amended filing
			viduals Filing Under Chap	oter 7 12/15
creditors have	claims secured by yo	ur property, or		
You must file this	ver is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or by the dat e time for cause. You must also send copies to	
	ople are filing together d date the form.	in a joint case, bo	th are equally responsible for supplying corre	ct information. Both debtors must
	nd accurate as possib our name and case nur		s needed, attach a separate sheet to this form.	On the top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	e Secured Claims		
1 For any credito	ors that you listed in Pa	art 1 of Schedule D	: Creditors Who Have Claims Secured by Prop	perty (Official Form 106D), fill in the
information be			What do you intend to do with the property secures a debt?	
Creditor's M	r. Cooper		Surrender the property.	■ No
name:			Retain the property and redeem it.	☐ Yes
Description of	12 Knoll Rd Rocky		☐ Retain the property and enter into a Reaffirmation Agreement.	Li Tes
property	11778 Suffolk Cou	inty	☐ Retain the property and [explain]:	
securing debt:				
Part 2: List Yo	ur Unexpired Persona	l Property Leases		
in the information	n below. Do not list rea	ıl estate leases. Un	in Schedule G: Executory Contracts and Unexperied leases are leases that are still in effecthe trustee does not assume it. 11 U.S.C. § 365	t; the lease period has not yet ended.
Describe your un	nexpired personal prop	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea Property:	sed			☐ Yes
Lessor's name:				□ No
Description of lea Property:	sed			☐ Yes
Lessor's name:				□ No
Official Form 108		Statement of In	stention for Individuals Filing Under Chapter 7	page

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Debtor 1 Thomas J Grillo	Case number (if known)	
Description of leased		
Property:	☐ Yes	;
Lessor's name:	□ No	
Description of leased		
Property:	☐ Yes	;
Lessor's name:	□ No	
Description of leased		
Property:	☐ Yes	}
Lessor's name:	□ No	
Description of leased		
Property:	☐ Yes	;
Lessor's name:	□ No	
Description of leased		
Property:	☐ Yes	3
Part 3: Sign Below		
Under penalty of perjury, I declare that I have indicated my interpreted that is subject to an unexpired lease.	ention about any property of my estate that secures a	debt and any personal
X /s/ Thomas J Grillo	X	
Thomas J Grillo	Signature of Debtor 2	
Signature of Debtor 1		
Date May 14, 2019	Date	

Fill in this information to identify your case:	Check one box only as directed in this form and in Form
Debtor 1 Thomas J Grillo	122A-1Supp:
Debtor 2 (Spouse, if filing)	■ 1. There is no presumption of abuse
United States Bankruptcy Court for the: Eastern District of New York	□ 2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test Calculation</i> (Official Form 122A-2).
Case number(if known)	☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
	☐ Check if this is an amended filing
Official Form 122A - 1	, and the second
Chapter 7 Statement of Your Current Mor	nthly Income 12/15
Be as complete and accurate as possible. If two married people are filing together attach a separate sheet to this form. Include the line number to which the addition case number (if known). If you believe that you are exempted from a presumption qualifying military service, complete and file Statement of Exemption from Presum.	nal information applies. On the top of any additional pages, write your name and of abuse because you do not have primarily consumer debts or because of
Part 1: Calculate Your Current Monthly Income	
 What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. 	
☐ Married and your spouse is filing with you. Fill out both Columns	A and B lines 2-11
■ Married and your spouse is NOT filing with you. You and your s	
Living in the same household and are not legally separated.	
☐ Living separately or are legally separated. Fill out Column A, linguistry penalty of perjury that you and your spouse are legally separated.	nes 2-11; do not fill out Column B. By checking this box, you declare under d under nonbankruptcy law that applies or that you and your spouse are
living apart for reasons that do not include evading the Means Te Fill in the average monthly income that you received from all sources, derived	
101(10A). For example, if you are filing on September 15, the 6-month period would the 6 months, add the income for all 6 months and divide the total by 6. Fill in the responses own the same rental property, put the income from that property in one column.	be March 1 through August 31. If the amount of your monthly income varied during sult. Do not include any income amount more than once. For example, if both
	Column A Column B Debtor 1 Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, and commission payroll deductions).	ons (before all \$ 0.00 \$ 0.00
Alimony and maintenance payments. Do not include payments from Column B is filled in.	a spouse if \$ 0.00 \$ 0.00
4. All amounts from any source which are regularly paid for househor of you or your dependents, including child support. Include regular from an unmarried partner, members of your household, your depender and roommates. Include regular contributions from a spouse only if Col filled in. Do not include payments you listed on line 3.	r contributions nts, parents,
5. Net income from operating a business, profession, or farm	
Gross receipts (before all deductions) \$ 0.00	otor 1
eramary and necessary operating expenses	Copy here -> \$ 0.00 \$ 0.00
6. Net income from rental and other real property	
	otor 1
Gross receipts (before all deductions) \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Cramary and necessary operating expenses	Copy here -> \$ 0.00 \$ 0.00
	\$ 0.00 \$ 0.00
7. Interest, dividends, and royalties	¥

Official Form 122A-1

Case number (if known)

					Column A Debtor 1		Column B Debtor 2 o non-filing		
8.	Uner	ployment compensation			\$	0.00	\$	0.00	
		ot enter the amount if you contend that the amount ocial Security Act. Instead, list it here:	received was a benef	fit under	•				
	Fo	r you\$	0.	00					
	Fo	your spouse \$	0.	00					
9.	Pens	ion or retirement income. Do not include any amit include any amit under the Social Security Act.	nount received that wa	s a	\$	0.00	\$	0.00	
10.	Do no recei dome	ne from all other sources not listed above. Spe of include any benefits received under the Social S yed as a victim of a war crime, a crime against hur stic terrorism. If necessary, list other sources on a pelow.	Security Act or paymen nanity, or international	nts or					
		Workers Comp			\$	1,680.00	\$	0.00	
					\$	0.00	\$	0.00	
		Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.		ulate your total current monthly income. Add lin column. Then add the total for Column A to the total		\$	1,680.00	+ \$	0.00]=[\$	1,680.00
Part	2:	Determine Whether the Means Test Applies to	o You					Total c	urrent monthly
12.	Calc	late your current monthly income for the year.	Follow these steps:						
	12a.	Copy your total current monthly income from line 1	1		Co	py line 11 l	nere=>	\$	1,680.00
		Multiply by 12 (the number of months in a year)						x 1	
	12b.	The result is your annual income for this part of the	e form				12b	· \$2	20,160.00
13.	Calc	late the median family income that applies to	you. Follow these step	os:					
	Fill in	the state in which you live.	NY						
	Fill in	the number of people in your household.	2						
	Fill in the median family income for your state and size of household								
14.	How	do the lines compare?							
	14a.	Line 12b is less than or equal to line 13. Of Go to Part 3.	n the top of page 1, ch	eck box	(1, There is	s no presum	nption of abus	e.	
	14b.	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	f page 1, check box 2	, The pr	resumption	of abuse is	determined b	y Form 12	22A-2.
art	3:	Sign Below							
		By signing here, I declare under penalty of perjury	that the information or	n this st	atement an	d in any atta	achments is tr	ue and co	orrect.
	>	/s/ Thomas J Grillo							
		Thomas J Grillo Signature of Debtor 1							
	Date	May 14, 2019							
		MM/DD/YYYY							
		f you checked line 14a, do NOT fill out or file Forn	n 122A-2.						
		f you checked line 14b, fill out Form 122A-2 and fi	le it with this form.						

Thomas J Grillo

Debtor 1

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

		ii District of New 101	K		
In	Thomas J Grillo	Debtor(s)	Case No.	7	
		Debioi(s)	Chapter		
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR DE	BTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing o be rendered on behalf of the debtor(s) in contemplation of o	of the petition in bankruptcy	, or agreed to be paid	to me, for services rendere	d or to
	For legal services, I have agreed to accept		\$	1,850.00	
	Prior to the filing of this statement I have received		\$	500.00	
	Balance Due		\$	1,350.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compens	ation with any other person	unless they are mem	pers and associates of my la	aw firm.
	☐ I have agreed to share the above-disclosed compensatio copy of the agreement, together with a list of the names				m. A
5.	In return for the above-disclosed fee, I have agreed to rende	er legal service for all aspec	ts of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statemed c. Representation of the debtor at the meeting of creditors at d. [Other provisions as needed] Negotiations with secured creditors to redereaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house 	ent of affairs and plan which and confirmation hearing, and uce to market value; exc as needed; preparation	n may be required; and any adjourned hear emption planning;	rings thereof;	of
6.	By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any disch any other adversary proceeding.			es, relief from stay acti	ons or
	(CERTIFICATION			
this	I certify that the foregoing is a complete statement of any agbankruptcy proceeding.	greement or arrangement for	payment to me for re	epresentation of the debtor(s) in
	May 14, 2019	/s/ Richard A. Jac	coby, Esq.		
_	Date	Richard A. Jacob	y, Esq.		
		Signature of Attorne	ey 7, Attorneys At Lav	ı	
		1737 North Ocea		•	
		Medford, NY 117	63		
		631-289-4600 Name of law firm			
		Trance of tan film			

United States Bankruptcy Court Eastern District of New York

In re	Thomas J Grillo		Case No.	
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: May 14, 2019

/s/ Thomas J Grillo
Thomas J Grillo
Signature of Debtor

Date: May 14, 2019

/s/ Richard A. Jacoby, Esq.
Signature of Attorney
Richard A. Jacoby, Esq.

Signature of Attorney
Richard A. Jacoby, Esq.
Jacoby & Jacoby, Attorneys At Law
1737 North Ocean Avenue
Medford, NY 11763
631-289-4600

USBC-44 Rev. 9/17/98

Chase P.O. Box 15123 Wilmington, DE 19850-5123

Mr. Cooper 8950 Cypress Waters Blvd Coppell, TX 75019

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

DEBTOR(S):	Thomas J Grille	0	CASE NO.:.
			(b), the debtor (or any other petitioner) hereby makes the following disclosure nowledge, information and belief:
was pending at any spouses or ex-spous partnership and one	time within eight ses; (iii) are affilia or more of its ger days of the comm	years before the tes, as defined neral partners; nencement of e	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case ne filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) either of the Related Cases had, an interest in property that was or is included in the later than 12 in the later than 13 included in the later than 14 included in the later than 15 included in the later than 16 incl
☐ NO RELATED	CASE IS PENDI	NG OR HAS I	BEEN PENDING AT ANY TIME.
THE FOLLOW	ING RELATED (CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.: 11 ·	- 70800 JUDGE	E: Eisenberg	DISTRICT/DIVISION: eastern
CASE STILL PENI	DING (Y/N): N	I	[If closed] Date of closing: 2011
CURRENT STAT	US OF RELATED	CASE: disc	
			(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE	RELATED (1	Refer to NOTE above): Prior Filing 2/14/2011
REAL PROPERTY SCHEDULE "A" O			DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE:	DISTRICT	T/DIVISION:
CASE STILL PENI	DING (Y/N):		[If closed] Date of closing:
CURRENT STAT	US OF RELATED	CASE:	
			(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE	RELATED (1	Refer to NOTE above):
REAL PROPERTY SCHEDULE "A" O			DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE:	_ DISTRICT	T/DIVISION:
CASE STILL PENI	DING (Y/N):		[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
(Dis	charged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to N	IOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A SCHEDULE "A" OF RELATED CASE:	A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals whose eligible to be debtors. Such an individual will be required	ho have had prior cases dismissed within the preceding 180 days may not to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTO	DRNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York	(Y/N): <u>Y</u>
CERTIFICATION (to be signed by pro se debtor/petitioner of	or debtor/petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankruptcy cas indicated elsewhere on this form.	case is not related to any case now pending or pending at any time, except
/s/ Richard A. Jacoby, Esq.	
Richard A. Jacoby, Esq. Signature of Debtor's Attorney Jacoby & Jacoby, Attorneys At Law 1737 North Ocean Avenue	Signature of Pro Se Debtor/Petitioner
Medford, NY 11763 631-289-4600	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

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